# Minutes Substance Abuse and Child Safety Task Force May 13, 2014 – 1 P.M. Indiana Statehouse – Room 431

Members Present: Sirrilla Blackmon, FSSA - Division of Mental Health and Addiction; Cathy J. Boggs, Community Health Network; Suzanne F. Clifford, Community Health Network; C.J. Davis, Four County Counseling Center; Benjamin Evans, Professional Licensing Agency; Mindi Goodpaster, Marion County Commission on Youth; Cathleen Graham, IARCCA, an Association of Children & Family Services; Lt. Kevin Hobson, Indiana State Police; Chief Stan Holt, Batesville Police Department; Marc D. Kniola, Indiana Department of Correction, Division of Youth Services; Suzanne O'Malley, Indiana Prosecuting Attorneys Council; Senator Randy Head, Chair; Lisa Rich, Indiana Department of Child Services; Letecia Timmel, Otis R. Bowen Center; Carey Haley Wong, Child Advocates; William G. Wooten, MD

Members Present via conference call: Kaarin Lueck, Wayne County Public Defenders' Office

**Staff Members Present:** Mike Brown, Indiana State Senate

Call to Order: 1:02 P.M.

## **Welcome and Introduction:**

Senator Head welcomed all members to the first Task Force meeting. He mentioned that the Task Force is more than just a meeting of professional people. They are tasked with finding problems and solving issues. Also, this is not an exclusive group, so if members want to talk outside of meeting times they are encouraged to do so.

- Made round of introductions
- If anyone needs to call in the future please call Mike Brown.

#### Goals and Objectives:

- Ran through priorities on sheet:
  - o Identify gaps in the array of substance abuse services, especially in rural areas;
  - o Increase the number of mental health and substance abuse providers;
  - Increase access to mental health and substance abuse services, regardless of ability to pay;
  - o Identify barriers to receipt of Medicaid;
  - o Increase access to mental health services for youth in the juvenile justice system;
  - Increase access to substance abuse services for youth in the juvenile justice system;
  - o Address geographic disparities in treatment resources;

- Address teen prescription drug abuse;
- Assess and address gaps in service array and access, with particular emphasis on remedying geographic disparities.

## **Data Sharing and Mapping Task Force:**

- The Commission has established a Data Sharing and Mapping Task Force to research and gather data on issues that any other Task Force would like.
- Senator Head stressed that this is a great resource for the group and they need to make sure that the right questions are asked before approaching them.

### **Creating a Strategy for Progress:**

• This is the biggest goal for today's meeting.

#### **Assigning Subcommittees:**

- Senator Head wants people to volunteer to fill subcommittees as opposed to him making appointments
- Dr. Wooten asked how long we have to work on issues assigned by the Task Force (TF). Senator Head believes the answer is a year and will double check.
- TF will locate a recent survey performed by DCS and the Judicial Center regarding the availability of services.
- C.J. Davis noted that we have access and disparity gaps. We need to ask how do we get people to the front door to treatment centers, and we also need to look at preventative techniques. Additionally, what are the payment structures?
- DCS is currently gathering data on evidence based practices and the TF will review after that's completed
- The TF saw three categories to address initially:
  - Access to services and the disparity of services;
  - o Determine best evidence based treatment programs; and
  - o Determine best evidence prevention programs
- Dr. Wooten mentioned that the TF should have a mission statement and goals to achieve its mission. Senator Head agreed and will draft something up and circulate to the members soon.
- Sirrilla Blackmon mentioned that DCS has many grants where there is a DWD component in training people. Also, there is a financial component that we can look at.
- Cathleen Graham asked when we examine child safety, are we also also at the availability of services and treatment for the parents? (After checking with Senator Holdman the group has a lot on its plate, so it should keep its focus on children).
- Suzanne Clifford believes that payment structures need to be addressed and addressed.

- Carey Haley Wong mentioned that the TF will want to explore the area of prenatal drug services and the welfare system, and Cathy Boggs stated a need to look at the number of providers available for services in rural areas.
- Mark Kniola mentioned that systems of care need to be addressed, and Dr. Wooten mentioned a need for a comprehensive plan to early prevention and treatment instead of reactionary type measures.
- C.J. Davis mentioned that we have about 5K child psychologists in the US and studies show that we need more like 30K.
- Suzanne Clifford mentioned that the biggest threat is getting kids into the workforce.

#### **Open Discussion:**

- Marc Kinola mentioned that in the last 5 years there has been an increase in substance abuse issues with juveniles in the DOC. As a result, everyone in DOC has been retrained because of these changes. The biggest issue is sending youth back to the community with little to no follow up. Often these youth go back to a home where drug abuse is prevalent.
- TF discussed how treatment is provided in the juvenile justice system and its disparities, what payment structures exist, what programs are available, and how do they work, and the importance of substance abuse services to expecting mothers
- The TF discussed the greying of the service provider workforce:
  - o Currently, 70% of the behavioral health workforce is 55 and older
  - Possibly partner with universities so students can work with providers. Also, eliminate barriers to this type of access.
- Division of Mental Health and Addiction has a care action plan and the TF will be looking more into this plan.
- Explore early intervention and treatment plans
- Determine what the state is currently working on and how much money goes to each reactive vs. proactive treatment/counseling
- Department of Correction does little to no follow-up treatment on rural youth, nor does it have any program to treat drug and addiction issues in the home
- Explore treatment opportunities for juveniles who are in detention before they go to trial.
- Use metrics to determine what works and what does not
- College students entering the mental health provider workforce are having a hard time finding a job why is this when there is such a big need for providers?
- What ways are there to where technology can be used to treat youth in the DOC that also involve their family. For example, using smartphones (Skype or Facetime) for the youth to undergo treatment along with the parent
- Services cost more in rural areas in part because of the drive times. How do we address this issue?
- The ways that counties can pay for treatment is inefficient. Who do we address this?

- Senator Head asked it we have college kids come in and help DOC youth? Marc Kinola stated that DOC does have college kids come in, but then numbers need to be expanded.
- Karrin Lueck stated that the TF should look at detention centers because often kids are held there for many months. Senator Head agreed and states that kids often sit there in detention without addressing their drug issues.
- Dr. Wooten mentioned that even in major metro areas there are shortfall in providers.
- Suzanne O'Malley asked if Indiana was the only state that's having these issues, and it was determined that every state is facing similar issues.
- Marc Kinola stated that we need to go back and investigate the success of the delivery of programs to make sure that programs are truly effective. We need to follow up so we can put money to programs that work.
- Cathleen Graham thought that our mission should be to find the right services for each individual child and parent.
- Senator Head believes that it is frustrating that college kids want to help DOC but at times they can't.
- Senator Head then asked the question: What can be done to improve access in rural areas?
  - C.J. Davis said: Transportation, stigma, and workforce issues. Also, many of the families are not engaged in the child's treatment and this is a big issue. Again, transportation is a major reason for this.
  - o Dr. Wooten: What kind of resources can we get? The State spends \$7.3 billion annually on the consequences of substance abuse. Only 1% of total expenditures go to prevention. 99% of resources are spent on consequences: courts, jails, medical, law enforcement, environmental cleanup, child care, etc. Senator Head responded with the fact that resources of the state are limited and we will try to get money for the items that the TF finds out. We still have to persuade the executive branch.
- Marc Kinola mentioned that when transportation is not possible, the DOC Division of Youth Services uses Skype to address the transportation issue. All in all, DOC is getting parents to use their cell phones to communicate with youth.
- Ben Evans mentioned that the medical licensing board is looking into doing a few things.
- Letecia Timmel: Not having the ability to work with the family while a child is being placed is an issue that we may want to consider.
- Suzanne Clifford asked what about getting with agencies or health networks to create a program or a smart phone application to help address the treatment issue where everyone can share the app. Also, work being completed on a Youth Suicide Prevention grant.
- Cathleen Graham mentioned that Indiana has lost providers in rural areas because of the cost (traveling to the family, gas, etc). There needs to be incentives for providers to cover their costs. Senator Head then asked what the cost to travel 1 mile for a provider to visit a person? This is a question for the Data Sharing and Mapping Task Force.
- C.J. Davis mentioned that it costs a lot of money to pull kids out of their homes and place them in other homes. Perhaps the TF could look at this issue.
- Suzanne Clifford mentioned that there was a medical crisis services bill by offered by Senator Crider last session. Mike Brown is to look this legislation up.

• Finally, the Judicial Center recently conducted a survey regarding substance abuse. Mike Brown is to look this legislation up.

# **Next Meeting Date:**

- Looking about 6 weeks out
- Senator Head wants members to work on mission statement and goals
- Need to reach a consensus on subcommittees
- Wants discussion on everything that is pertinent

# Adjourn:

• 1:05 P.M.